Name	
Address	-
Address	
City, State, Zip	-
ony, state, zip	
Phone	-
	Check your email. You will receive information and documents at this email address.
Email	
	ant/Respondent's Attorney (Utah Bar #:)
<ul><li>Plaintiff/Petitioner's Licensed Paralegal F</li><li>Defendant/Respondent's Licensed Parale</li></ul>	
In the [ ] District [	] Justice Court of Utah
Judicial Distri	ct County
dadioial bloth	ot Gounty
Court Address	
	Motion to Enforce Writ of Garnishment
Plaintiff/Petitioner	(Motion for Order to Show Cause)
V.	
<b>v.</b>	Case Number
Defendant/Respondent	Judge
	Guage
	Commissioner (domestic cases)
	Commissioner (domestic cases)
Attach:	, ,
<ul> <li>Certificate of Service showing service upor</li> </ul>	, ,
<ul><li>Certificate of Service showing service upor</li><li>Order to Garnishee to Show Cause</li></ul>	n the garnishee of the Writ of Garnishment
<ul><li>Certificate of Service showing service upor</li><li>Order to Garnishee to Show Cause</li></ul>	the garnishee of the Writ of Garnishment  ave had the Writ of Garnishment served on
<ul><li>Certificate of Service showing service upor</li><li>Order to Garnishee to Show Cause</li></ul>	n the garnishee of the Writ of Garnishment

2.	The deadline to comply with the Writ of Garnishment was			
	(date), which has passed. The garnishee has no complied with the Writ of Garnishment by failing to:			
3.	I have tried to settle the issue without further court action. I have in good faith discussed or attempted to discuss the issue with the garnishee.			
4.	I request that the court order the garnishee to explain why they should not be held in contempt or why the court should not make other orders, including reimbursement for the cost of this motion.			
Plai	ntiff/Petitioner or Defendant/Respondent			
I dec	lare under criminal penalty under the law of Utah that everything stated in this document is true.			
Signe	ed at (city, and state or country).			
	Signature ▶ _			
Date				
<b>A44 a</b>	way or Licensed Developed Drestitioner of record (7 15 - 15)			
Allo	rney or Licensed Paralegal Practitioner of record (if applicable)			
Date	Signature ►			
Date	Printed Name			

## **Certificate of Service**

This certificate of service is required only if the other party is represented by an attorney. **The other party should be served by a sheriff, constable or private investigator.** 

I certify that I filed with the court and am serving a copy of this Motion for Order to Show Cause on the following people.

Person's Name	Service Method	Service Address	Service Date		
	[ ] Mail				
	Hand Delivery				
	[ ] E-filed				
	[ ] Email				
	[ ] Left at business (With person in charge				
(Other mant de attender : if	or in receptacle for deliveries.)				
(Other party's attorney, if	[ ] Left at home (With person of suitable				
applicable)	age and discretion residing there.)				
	[ ] Mail				
	[ ] Hand Delivery				
	[ ] E-illed   [ ] Email				
	Left at business (With person in charge				
	or in receptacle for deliveries.)				
(Other party's attorney, if	[ ] Left at home (With person of suitable				
applicable)	age and discretion residing there.)				
Signature ▶					
Date					
Printed Name					